U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only	LV DECODE DDEDADING THIS DEDODT
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.	
1. File Number U - 1/1 35 /	2. Fiscal Year Covered From:
	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Michael D Jones	Name Sheet Metal Workers Local Union No. 20
	Labor Organization File Number 515-617
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any P.O. Box 20530
Street 31 1/2 South 13th Street	Street 2828 E. 45th Street, P.O.Box 20530
City Terre Haute	City Indianapolis
State Indiana ZIP Code + 4 47807-3907	State
5. Position in labor organization. Business Representative	
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name SMW LU #20 Joint App. & Trng Trust	Expenses for attending the Regional Apprenticeship Contest
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any Suite A	7.b. Amount.
Street 2828 E. 45th Street	
City Indianapolis	\$705.87
State Indiana ZIP Code + 4 46205	
Signature	
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed Yeeker I Sp	On 7/5/2005 812-234-0751 Telephone Number